

JIM GIBBONS
Governor

MICHAEL J. WILLDEN
Director



RICHARD WHITLEY, M.S.
Administrator

TRACEY D. GREEN, M.D.
State Health Officer

STATE OF NEVADA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
HEALTH DIVISION
BUREAU OF HEALTH CARE QUALITY AND COMPLIANCE

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☐ Radiological Health
2080 E. Flamingo
Suite 319
Las Vegas, Nevada 89119
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September 1, 2009

Dear Owner/Administrator:

The 1999 legislature amended Nevada Revised Statutes (NRS) Chapter 233B to require that state agencies assess the impact of regulation changes or development on small businesses. A small business is defined in statute as "a business conducted for profit which employs fewer than 150 full-time or part-time employees" (NRS 233B.0382).

The Bureau of Health Care Quality and Compliance (BHCQC) are in the process of revising the Nevada Administrative Code (NAC), Chapter 449 for Fees. These regulation changes are being proposed in accordance with Assembly Bill 123, of the 2009 legislative session and the Governor's approved budget for the 2010 -2011 biennium concerning licensure requirements for outpatient settings and the periodicity of surveys for ambulatory surgery centers and outpatient settings. They require facility fees to offset the cost of annual survey workload for ambulatory surgery centers and outpatient settings. The cost for licensure of ambulatory surgery centers is doubled. The fees collected will enable Health Division staff to conduct annual surveys to ensure good infection control practices and ensure the protection of public health.

In order that we may determine the impact that these regulations will have on you as a small business, it will be necessary for BHCQC to gather certain information about your facility. If it is determined that the proposed regulations are likely to impose a direct and significant economic burden on small businesses, a small business impact statement will be provided at public workshops to be held prior to presenting the new regulations to the Board of Health. A questionnaire is enclosed with this letter so that we may document the information required to accomplish the impact statement. **Please respond to the questions no later than September 21, 2009.** You may mail or FAX the completed form to Paul Shubert, Health Facilities Surveyor IV, Bureau of Health Care Quality and Compliance, 4220 S. Maryland Parkway, Suite 810, Bldg. D, Las Vegas, Nevada 89119. FAX (702) 486-6520.

If you have further questions regarding this matter, please do not hesitate to call Mr. Shubert at (702) 486-6515.

Sincerely,

A handwritten signature in black ink, appearing to read "Shirley Rains".

Shirley Rains, Administrative Assistant IV
For Paul Shubert, Health Facilities Surveyor IV

Encl.

Small Business Impact Questionnaire

Fees

The following questions pertain to how the changes in the Nevada Administrative Code presented in the enclosure will affect your business. If it is determined that the proposed regulation is likely to impose a direct and significant economic burden upon a small business; or directly restrict the formation, operation or expansion of a small business; then the agency will take any or all of the following actions:

1. Insofar as practicable, consult with owners and officers of affected small businesses;
2. Consider methods to reduce the impact of the proposed regulation, and
3. Prepare a small business impact statement and make copies of the statement available to the public at the workshop conducted and the public hearing held pursuant to NRS 233B.061.

Please answer each of the questions that apply and add any qualifying remarks that may help us to understand your position. Mail or FAX your completed form, no later than September 21, 2009, to:

Paul Shubert, HFS IV
Bureau of Health Care Quality and Compliance
4220 S. Maryland Parkway, Suite 810, Bldg. D
Las Vegas, NV 89119
FAX (702)-486-6520

Name _____

Organization _____

Date _____

NRS 233B.0382 "Small Business defined." "Small business" means a business conducted for profit, which employs fewer than 150 full-time or part-time employees.

1. How many employees are currently employed by your business?

If more than 150, you will not need to answer the rest of the questions. Please FAX questionnaire to the above address. If less than 150, please continue with the remaining questions.

2. Will a specific regulation have an adverse economic effect upon your business?

Yes _____ No _____ Explain: Please list each regulation
and explain the impact.

3. Will the regulation (s) have any beneficial effect upon your business?

Yes _____ No _____

Explain:

4. Do you anticipate any indirect adverse effects upon your business?

Yes _____ No _____

Explain:

5. Do you anticipate any indirect beneficial effects upon your business?

Yes _____ No _____

Explain:

**PROPOSED REGULATION OF THE
STATE BOARD OF HEALTH**

CHAPTER 449

Fees

These regulation changes are being proposed in accordance with Assembly Bill 123, of the 2009 legislative session and the Governor's approved budget for the 2010 - 2011 biennium.

EXPLANATION – Matter *in italics* is new; matter in brackets [~~omitted material~~] is material to be omitted.

Section 1. Chapter 449 of NAC is hereby amended by adding thereto the provisions set forth as section 2, inclusive, of this regulation.

Sec. 2. *“Outpatient setting” defined. “Outpatient setting” has the meaning ascribed to it in NAC 449.*

Sec. 3. NAC 449.013 is hereby amended to read as follows:

NAC 449.013 License *or Permit* and renewal fees to operate ambulatory surgical center, facility for treatment of irreversible renal disease, home office, subunit agency or branch office of home health agency, rural clinic, obstetric center, program of hospice care, independent center for emergency medical care, nursing pool, facility for treatment with narcotics, medication unit, referral agency, halfway house for recovering alcohol and drug abusers, facility for refractive surgery, mobile unit, [~~and~~] facility for transitional living for released offenders, *and outpatient setting*; expiration of application for license *or permit*; refund of certain fees.

1. Except as otherwise provided in subsection 4 and NAC 449.0168, an applicant for a license *or permit* to operate any of the following facilities, programs of hospice care or agencies must pay to the Health Division the following nonrefundable fees:

(a) An ambulatory surgical center.....[3,570].7,140

- | | |
|---|--------------|
| (b) A facility for the treatment of irreversible renal disease..... | 2,748 |
| (c) A home office or subunit agency of a home health agency..... | 3,034 |
| (d) A branch office of a home health agency..... | 2,000 |
| (e) A rural clinic..... | 2,160 |
| (f) An obstetric center..... | 1,564 |
| (g) A program of hospice care..... | 2,106 |
| (h) An independent center for emergency medical care..... | 2,950 |
| (i) A nursing pool..... | 4,272 |
| (j) A facility for treatment with narcotics..... | 2,482 |
| (k) A medication unit..... | 1,200 |
| (l) A referral agency..... | 2,000 |
| (m) A halfway house for recovering alcohol and drug abusers..... | 2,020 |
| (n) A facility for refractive surgery..... | 7,556 |
| (o) A mobile unit..... | 2,090 |
| (p) A facility for transitional living for released offenders..... | 2,020 |
| (q) An outpatient setting..... | 3,570 |
2. Except as otherwise provided in subsection 4, an applicant for the renewal of such a license *or permit* must pay to the Health Division the following nonrefundable fees:
- | | |
|---|-----------------------------|
| (a) An ambulatory surgical center..... | .. 1,785 \$3,570 |
| (b) A facility for the treatment of irreversible renal disease..... | 1,374 |
| (c) A home office or subunit agency of a home health agency..... | 1,517 |
| (d) A branch office of a home health agency..... | 1,000 |
| (e) A rural clinic..... | 1,080 |
| (f) An obstetric center..... | 782 |
| (g) A program of hospice care..... | 1,053 |

(h) An independent center for emergency medical care.....	1,475
(i) A nursing pool.....	2,136
(j) A facility for treatment with narcotics.....	1,241
(k) A medication unit.....	600
(l) A referral agency.....	1,000
(m) A halfway house for recovering alcohol and drug abusers.....	1,010
(n) A facility for refractive surgery.....	3,912
(o) A mobile unit.....	1,045
(p) A facility for transitional living for released offenders.....	1,010
(q) An outpatient setting.....	1,785

3. An application for a license *or permit* is valid for 1 year after the date on which the application is submitted. If an applicant does not meet the requirements for licensure imposed by chapter 449 of NRS or the regulations adopted pursuant thereto within 1 year after the date on which he submits his application, he must submit a new application and pay the required fee to be considered for licensure *or a permit*.
4. Pursuant to NRS 449.050, if an application for a license to operate a facility for transitional living for released offenders or the renewal of such a license is denied, any amount of a fee paid pursuant to paragraph (p) of subsection 1 or paragraph (p) of subsection 2 that exceeds the expenses and costs incurred by the Health Division must be refunded to the applicant.